



2134

JFW

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in this Submission

Application Number 10/007,339

Filing Date 10/26/2001

First Named Inventor Petr Peterka

Group Art Unit 2132

Examiner Name Perungavoor, V.

Attorney Docket Number D2570

**ENCLOSURES**

(check all that apply)

☒ Fee Transmittal Form☐ Fee Attached☒ Amendment/Reply☐ After Final☐ Affidavits/Declaration(s)☐ Extension of time Request☐ Express Abandonment Request☐ Information Disclosure Statement☐ Certified Copy of Priority Documents☐ Response to Missing Parts/  
Incomplete Application☐ Response to Missing Parts  
Under 37 CFR 1.52 or 1.53☐ Assignment Papers  
(for an Application)☒ Drawing Replacement Sheet☐ Licensing-Related papers☐ Petition☐ Petition to Convert to a  
Provisional Application☒ Power of Attorney, Revocation,  
Change of Correspondence  
Address☐ Terminal Disclaimer☐ Request for Refund☐ CD, Number of CDs☐ After Allowance

Communication to Group

☐ Appeal Communication to Board  
of Appeals and Interferences☐ Appeal Communication to Group  
(Appeal Notice, Brief, Reply Brief)☐ Proprietary Information☐ Status Letter with appropriate copies☐ Other Enclosure(s) (please identify below)☐ Response to Restriction Requirement☐ Associate Power of Attorney☐ RCE☐ Copy of Notice to File Missing Parts

Remarks

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**Firm or  
Individual

Benjamin D. Driscoll

Registration No.

41,571

Signature

Date

June 16, 2005

**CERTIFICATE OF TRANSMITTAL/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to facsimile number \_\_\_\_\_ or deposited with the United States Postal Service with sufficient postage thereon, as first-class mail, in an envelope addressed to:  
Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313 on the date listed below:

Typed or printed name Carol J. Smith

Signature

Date

June 16, 2005

<div>Effective on 12/08/2004</div> <div>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)</div> <div><div>QIPE</div><div>JUN 20 2005</div><div>PATENT &amp; TRADEMARK OFFICE</div></div> <div><b>FEE TRANSMITTAL</b> For FY 2005</div> <div><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</div>		<div>Complete if Known</div> <table><tr><td>Application Number</td><td>10/007,339</td></tr><tr><td>Filing Date</td><td>10/26/2001</td></tr><tr><td>First Named Inventor</td><td>Petr Peterka</td></tr><tr><td>Examiner Name</td><td>Perungavoor, V.</td></tr><tr><td>Group Art Unit</td><td>D2570</td></tr><tr><td>Attorney Docket No.</td><td>D2570-06</td></tr></table>		Application Number	10/007,339	Filing Date	10/26/2001	First Named Inventor	Petr Peterka	Examiner Name	Perungavoor, V.	Group Art Unit	D2570	Attorney Docket No.	D2570-06
Application Number	10/007,339														
Filing Date	10/26/2001														
First Named Inventor	Petr Peterka														
Examiner Name	Perungavoor, V.														
Group Art Unit	D2570														
Attorney Docket No.	D2570-06														
TOTAL AMOUNT OF PAYMENT (\$) <b>200</b>															
METHOD OF PAYMENT (check all that apply)															
<div><input type="checkbox"/> Check    <input type="checkbox"/> Credit card    <input type="checkbox"/> Money Order    <input type="checkbox"/> None    <input type="checkbox"/> Other (please identify):</div> <div><input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: <b>502117</b>    Deposit Account Name: <b>MOTOROLA, INC.</b></div> <div>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)</div> <div><div><input checked="" type="checkbox"/> Charge fee(s) indicated below</div><div><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee</div><div><input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s)</div><div><input checked="" type="checkbox"/> Credit any overpayments</div></div> <div>under 37 CFR 1.16 and 1.17</div> <div>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</div>															
<b>FEE CALCULATION</b>															
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>															
FILING FEES		SEARCH FEES		EXAMINATION FEES											
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>									
Utility	300	150	500	250	200	100									
Design	200	100	100	50	130	65									
Plant	200	100	300	150	160	80									
Reissue	300	150	500	250	600	300									
Provisional	200	100	0	0	0	0									
<b>2. EXCESS CLAIM FEES</b>															
<u>Fee Description</u>					<u>Fee(\$)</u>	<u>Small Entity Fee (\$)</u>									
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent					50	25									
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent					200	100									
Multiple dependent claims					360	180									
<u>Total Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>										
<div>- 20 or HP=</div>		<div>x</div>	<div>=</div>	<div></div>	<div>Fee(\$)</div> <div>Fee Paid (\$)</div>										
HP=highest number of total claims paid for, if greater than 20															
<u>Indep. Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>											
<div>- 3 or HP=</div>		<div>x</div>	<div>=</div>	<div>200</div>											
HP=highest number of independent claims paid for, if greater than 3															
<b>3. APPLICATION SIZE FEE:</b>															
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).															
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>										
<div>- 100 =</div>	<div>/50 =</div>	<div>(round up to a whole number) x</div>		<div></div>	<div></div>										
<b>4. OTHER FEE(S)</b>															
<div></div>															
<b>SUBMITTED BY</b>				Complete (if applicable)											
<u>Name (Print/Type)</u>	<b>Benjamin D. Driscoll</b>			<u>Registration No.</u>	<b>41,571</b>	<u>Telephone</u>									
<u>Signature</u>	<div></div>			<u>Date</u>	<b>June 16, 2005</b>										